

Chapter 2: Intervention Cost-Effectiveness: Overview of General Messages and Specific Neglected Opportunities

Objective: The theme of this chapter is ostensibly to provide a reader with some sense of priorities that cut across different diseases and interventions. In the course of doing this, the chapter will

1. Point out good bargains for health policy makers
2. Highlight bad buys that are currently widely prevalent
3. Offer something like a best buy package for a \$10 million additional investment in health.
4. Perhaps point out how much that additional \$10 million would get if one were invest in a non-optimal package (defined perhaps by current practice in each region of the world)

Scope: Evaluating cost-effective interventions drawn from the entire pool of interventions discussed in the book is certainly one option but may not be the most useful summarization of the evidence presented both because some very cost-effective interventions may not necessarily address diseases that impose the greatest burden on developing countries. We can restrict our focus on the basis of one or more the following criteria:

1. Diseases that contribute the most to deaths
2. Diseases that contribute the most to deaths and disability (measured in DALYs)
3. Interventions that currently have the greatest effect on reducing disability
4. Interventions that have the greatest potential to reduce disability (based on scalability)

Regardless of the criterion applied, we should ensure that the list covers diseases and interventions that are the most important in each region in our analysis.

Chapter outline:

1. Introduction
2. Scope of diseases and interventions considered in this chapter
3. Identifying cost-effective interventions in the world
4. Cost-effective interventions by WB region
5. Widely prevalent interventions that are not cost-effective both in the world and by region
6. Best buy package of interventions for a million population for a limited amount of money
7. Discussion
8. Conclusions